

ATTACHMENT H

Mountain View Center for the Performing Arts
Complimentary Ticket Request Form

TICKET SERVICE PHONE: (650) 903-6555 FAX: (650) 962-9900

All complimentary Ticket Requests must be accompanied
by this form or an equivalent document.

- To complete a request, this form must be submitted to the Center no later than 12:00 noon,
one (1) business day (Monday - Friday) prior to your first performance.
- The contracted Ticket Contact must validate a request by signing this form.
- Unsigned Comp Request Forms will not be accepted.
- Unless otherwise indicated, all comp tickets will be held at the box office indefinitely.
- To release unclaimed comps 10 minutes prior to curtain, put a check next to each
applicable name.
- Comps requested here will be available at Will Call one hour prior to curtain.

Event Title:

Contact Name:

Event Date/Time:

Contact Phone Number:

FOR OFFICE
USE ONLY:

| Full Name of Guest | | Location Request | # of Comps | ✓ to Release Comps | Order # | Released |
|--------------------|------------|---------------------|---------------|--------------------------|---------|----------|
| Last Name | First Name | | | | | |
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Total Comps Required: _____

Special Requests:

Submitted By _____